

# Compendium of Diabetes Quality Initiatives

From Wisconsin's Health Maintenance Organizations Involved in  
The Collaborative Diabetes Quality Improvement Project



## **ACKNOWLEDGEMENTS**

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Partners of the WI Collaborative Diabetes Quality Improvement Project include:

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**IMPROVING DIABETES CARE**  
**QUALITY IMPROVEMENT ACTIVITY CASE STUDIES**  
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## **EXECUTIVE SUMMARY**

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## **BACKGROUND**

For the past five years, the majority of Wisconsin's health maintenance organizations (HMOs) have partnered with the WI Diabetes Prevention and Control Program (DPCP), the WI Cardiovascular Health Program, the University of Wisconsin – Madison Department of Population Health Sciences, MetaStar, Inc. (Wisconsin's Quality Improvement Organization), Great Lakes Inter-Tribal Council, Inc., and the WI Division of Health Care Financing (Medicaid Program) to implement a unique public-private partnership, the Collaborative Diabetes Quality Improvement Project (Project).

The goal of the Project is to improve the quality of diabetes care for people who receive services through Wisconsin's HMOs and two other large health systems through:

- Evaluating implementation of the *WI Essential Diabetes Mellitus Care Guidelines* through the reporting of HEDIS® Comprehensive Diabetes Care Measures;
- Sharing data issues, strategies, initiatives, and lessons learned;
- Improving diabetes care through collaborative quality improvement initiatives, including a statewide Diabetes Eye Care Initiative and a Cardiovascular Risk Reduction Project.

A valuable resource introduced to the Project participants by Dean Groth, Pfizer, Inc., is "Quality Profiles™, In Pursuit of Excellence in Managed Care." Quality Profiles™, developed by The National Committee for Quality Assurance (NCQA) and Pfizer, Inc., highlights successful quality improvement initiatives and case studies elicited from numerous health plans across the nation. Mr. Groth offered an opportunity to develop a "Wisconsin-specific" compendium of diabetes quality improvement initiatives to expand sharing within the Project.

## **METHODS**

Pfizer, Inc. provided an unrestricted educational grant to the American Diabetes Association, Wisconsin Office to develop a Wisconsin-specific Compendium of Diabetes Quality Initiatives.

All twenty of Wisconsin's HMOs were invited to sign a Memorandum of Agreement (MOA) and submit an NCQA Quality Improvement Activity (QIA) form along with sample tools. Eight of ten HMOs who signed the MOA submitted enough detailed information for inclusion in the Compendium. A workgroup, comprised of Project partners, the DPCP, and a consultant guided the Compendium development process and developed a QIA summary template to ensure the inclusion of useful, relevant information that would also ensure confidentiality for each HMO. The consultant developed draft "QIA summaries" through reviews of submitted materials and interviews with HMO diabetes quality improvement staff. HMOs validated their summaries and tools to ensure accuracy prior to publication. The workgroup reviewed written materials and provided feedback on drafts. Summaries were not peer-reviewed during this process.

## **OUTCOMES**

Eight HMOs collaborated to develop the Compendium. Participating HMOs with strong quality improvement initiatives demonstrated significant improvements in the frequency of diabetes-related eye exams, A1c and lipid testing, and nephropathy monitoring, as well as in A1c and lipid control. Some strategies used by these HMOs to achieve these improvements are:

- More inclusive quality improvement teams over time
- Increased use of diabetes teams, champions, and case management services
- More in-depth barrier analysis and intervention evaluation
- Community collaboration
- More advanced information systems for tracking, feedback, reports, and development of “targeted” interventions
- Support for providers and clinics
- An increased focus on the role of the consumer
- Increased use of technology to enhance communication and outreach to members

## **IMPLICATIONS**

This Compendium highlights the experiences of eight HMO partners who shared the details of their diabetes quality improvement initiatives, including barriers, challenges, interventions, and lessons learned in their efforts to improve diabetes care. Data included in each case study summary are intended to illustrate each HMO’s evaluation process for measuring improvement. The data are **not** intended to use to compare HMOs to one another.

This publication demonstrates an extraordinary level of sharing and cooperation among Wisconsin’s diverse, competitive HMOs. The WI Collaborative Diabetes Quality Improvement Project continues to offer a unique opportunity for diverse partners to work together to improve diabetes care statewide.